

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ACTRIGHT

ADDRESS (number and street)

2029 K STREET NW SUITE 300

☐ Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00488478

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brian S Brown

Signature of Treasurer

Brian S Brown

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ACTRIGHT

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
10		31		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2013</div>		<div>3802.26</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>12227.01</div>	
(c) Total Receipts (from Line 19)	<div>1978.20</div>	<div>48628.07</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>14205.21</div>	<div>52430.33</div>
7. Total Disbursements (from Line 31).....	<div>4352.48</div>	<div>42577.60</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>9852.73</div>	<div>9852.73</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>69893.93</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ACTRIGHT

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	1	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1835.00	46431.77
(ii) Unitemized	0.00	1080.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1835.00	47511.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1835.00	47511.77
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	143.20	1116.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1978.20	48628.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1978.20	48628.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	247.48	16215.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	247.48	16215.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3580.00	21003.59
24. Independent Expenditures (use Schedule E)	0.00	4673.57
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	525.00	555.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	525.00	555.00
29. Other Disbursements	0.00	130.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4352.48	42577.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4352.48	42577.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1835.00	47511.77
34. Total Contribution Refunds (from Line 28(d))	525.00	555.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1310.00	46956.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	247.48	16215.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	143.20	1116.30
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	104.28	15099.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 68

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Christine Adame

Mailing Address 11003 Langdon Ln

City State Zip Code
Houston TX 77072

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Accountant

Duncan Interests

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.6608

Amount of Each Receipt this Period

25.00

Kirk Jorgensen for Congress

Full Name (Last, First, Middle Initial)

B. George Atkinson

Mailing Address P.O. Box 56871

City State Zip Code
Jacksonville FL 32241

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Consultant

Atkinson and Associates, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2013

Transaction ID : SA11AI.6675

Amount of Each Receipt this Period

20.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. robert becker

Mailing Address 4643 windward rd

City State Zip Code
lisle IL 60532

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

retired

Robert Becker PhD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2013

Transaction ID : SA11AI.6677

Amount of Each Receipt this Period

10.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Ronald Boggs

Mailing Address 416 Ponderosa Trail

City

Murphy

State

TX

Zip Code

75094

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

75.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6651

Amount of Each Receipt this Period

15.00

ActRight (PAC)

Full Name (Last, First, Middle Initial)

B. Christine Bower

Mailing Address 43403 Messina St.

City

Temecula

State

CA

Zip Code

92592

FEC ID number of contributing
federal political committee.

C

Name of Employer

Broadspire

Occupation

Nurse case manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2013

Transaction ID : SA11AI.6682

Amount of Each Receipt this Period

25.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. George Bullman

Mailing Address 2192 Pacific Ave #A

City

Costa Nesa

State

CA

Zip Code

92627

FEC ID number of contributing
federal political committee.

C

Name of Employer

Flight Instructor

Occupation

Sunrise Aviation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 16 / 2013

Transaction ID : SA11AI.6673

Amount of Each Receipt this Period

20.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 68
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Marie Cardona

Mailing Address 726 Rocklyn Dr

City State Zip Code
 Windcrest TX 78239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : SA11AI.6660

Amount of Each Receipt this Period

10.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Leroy Chavez

Mailing Address 7631 Pomelo Drive

City State Zip Code
 West Hills CA 91304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Valley Vineyard

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28.33

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 07 / 2013

Transaction ID : SA11AI.6636

Amount of Each Receipt this Period

20.00

Treadwell Alaska Committee

Full Name (Last, First, Middle Initial)

C. Leroy Chavez

Mailing Address 7631 Pomelo Drive

City State Zip Code
 West Hills CA 91304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Valley Vineyard

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38.33

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 07 / 2013

Transaction ID : SA11AI.6637

Amount of Each Receipt this Period

10.00

ROUNDS FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Mark Christians

Mailing Address 5010 Woodway Drive
Apt. 109

City State Zip Code
Houston TX 77056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Category Manager

Occidental Petroleum+Corp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2013

Transaction ID : SA11AI.6612

Amount of Each Receipt this Period

100.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

B. Samuel Clawser

Mailing Address 645 Crestview Ave

City State Zip Code
Niceville FL 32578

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Kangaroo

cashier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2013

Transaction ID : SA11AI.6667

Amount of Each Receipt this Period

12.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

C. Paul Collier

Mailing Address 324 Knollglen

City State Zip Code
Irvine CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Parking Lot Attendant

Disneyland

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2013

Transaction ID : SA11AI.6623

Amount of Each Receipt this Period

5.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. David Crear

Mailing Address PO Box 52

City State Zip Code
 Minnetonka Beach MN 55361

FEC ID number of contributing federal political committee.

C

Name of Employer

Shrimp Culture

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2013

Transaction ID : SA11AI.6666

Amount of Each Receipt this Period

50.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

B. Stephanie Cripe

Mailing Address 2614 Pageland Hwy

City State Zip Code
 Monroe NC 28112

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013

Transaction ID : SA11AI.6640

Amount of Each Receipt this Period

10.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

C. Kenneth Dawson

Mailing Address 12659 W. Gould Drive

City State Zip Code
 Littleton CO 80127

FEC ID number of contributing federal political committee.

C

Name of Employer

retired

Occupation

n/a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.6671

Amount of Each Receipt this Period

50.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Jeffrey DeMaso

Mailing Address 60 Country Place

City

Shelton

State

CT

Zip Code

06484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6648

Amount of Each Receipt this Period

10.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Sandy Denis

Mailing Address 3211 E. Ave. C

City

Bismarck

State

ND

Zip Code

58501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 10 / 2013

Transaction ID : SA11AI.6664

Amount of Each Receipt this Period

10.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

C. robert eddy

Mailing Address 19 nh route 104

City

meredith

State

NH

Zip Code

03253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

disable

non

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 26 / 2013

Transaction ID : SA11AI.6688

Amount of Each Receipt this Period

25.00

ActRight (PAC)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Michael Ferri

Mailing Address 102 Saint Sabre Drive

City

Swansea

State

IL

Zip Code

62226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6653

Amount of Each Receipt this Period

5.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Jose Garcia

Mailing Address 13603 Pecan Oak Dr.

City

Houston

State

TX

Zip Code

77065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mechanical Assembly

Occupation

Exterran Holdings

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 26 / 2013

Transaction ID : SA11AI.6686

Amount of Each Receipt this Period

20.00

ActRight (PAC)

Full Name (Last, First, Middle Initial)

C. Catherine Hall

Mailing Address 4264 Jameson Circle

City

Corona

State

CA

Zip Code

92881

FEC ID number of contributing
federal political committee.

C

Name of Employer

homemaker

Occupation

David C Hall, Ph. D.

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6635

Amount of Each Receipt this Period

50.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Michael W Hancock

Mailing Address 143 Santa Maria St.

City

Mabank

State

TX

Zip Code

75156

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 09 / 2013

Transaction ID : SA11AI.6655

Amount of Each Receipt this Period

25.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Elizabeth Hicks

Mailing Address 8839 Valjean Ave

City

North Hills

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Administrative Assistant

Occupation

Los Angeles Cascade, Inc.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.6610

Amount of Each Receipt this Period

25.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. Lange Kimball

Mailing Address 6106 Morningcrest Ct

City

Spring

State

TX

Zip Code

77389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stress Engineering Services, Inc.

Occupation

Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 03 / 2013

Transaction ID : SA11AI.6615

Amount of Each Receipt this Period

25.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Lange Kimball

Mailing Address 6106 Morningcrest Ct

City
Spring

State
TX

Zip Code
77389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stress Engineering Services, Inc.

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2013

Transaction ID : SA11AI.6616

Amount of Each Receipt this Period

10.00

Treadwell Alaska Committee

Full Name (Last, First, Middle Initial)

B. Charles Landreth

Mailing Address 38284 Cielo+Circle

City

Murrieta

State

CA

Zip Code

92563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Not Applicable

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2013

Transaction ID : SA11AI.6690

Amount of Each Receipt this Period

25.00

ActRight (PAC)

Full Name (Last, First, Middle Initial)

C. Karen Lang

Mailing Address 237 Lead King Dr.

City

Castle Rock

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Non Profit

Occupation

Wellspring Community

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2013

Transaction ID : SA11AI.6669

Amount of Each Receipt this Period

20.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Gregory Lopez

Mailing Address 364 E. Dexter St.

City State Zip Code
Covina CA 91723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fireman

Occupation

LA Co. FD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6639

Amount of Each Receipt this Period

525.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

B. David Lyday

Mailing Address 3306 Three Pines Drive

City State Zip Code
Kingwood TX 77339

FEC ID number of contributing
federal political committee.

C

Name of Employer

AIG VALIC

Occupation

Marketing Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

10 / 09 / 2013

Transaction ID : SA11AI.6658

Amount of Each Receipt this Period

10.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. Douglas Lyons

Mailing Address 27932 Breakwater Ct

City State Zip Code
Menifee CA 92585

FEC ID number of contributing
federal political committee.

C

Name of Employer

environmental technician

Occupation

Co. of San Bernardino

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6629

Amount of Each Receipt this Period

20.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

555.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Jennifer Markland

Mailing Address 14902 Foxcroft Rd.

City State Zip Code
Tustin CA 92780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homeschool mom

Occupation

self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6625

Amount of Each Receipt this Period

20.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

B. Dorothy Martin

Mailing Address 12627 S Eucalyptus Ave #137

City State Zip Code
Hawthorne CA 90250

FEC ID number of contributing
federal political committee.

C

Name of Employer

logistics specialist

Occupation

Raytheon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6627

Amount of Each Receipt this Period

25.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. gary melton

Mailing Address 31 planters row

City State Zip Code
skillman NJ 08558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6650

Amount of Each Receipt this Period

100.00

Larsen for Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Lupe Navarro

Mailing Address PO Box+1043

City State Zip Code
 Patton CA 92369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6633

Amount of Each Receipt this Period

5.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

B. Frances Notzon

Mailing Address 150 Laurel Heights Place

City State Zip Code
 San Antonio TX 78212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6646

Amount of Each Receipt this Period

10.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

C. Erica Presas

Mailing Address 2016 Pena St .

City State Zip Code
 Mission TX 78572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Pharmacist

Sam's Club Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 22 / 2013

Transaction ID : SA11AI.6679

Amount of Each Receipt this Period

10.00

Ted Cruz for Senate

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Danilo Ramirez

Mailing Address 28W525 Diversey Parkway

City

Chicago

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1.00

Date of Receipt

10 / 04 / 2013

Transaction ID : SA11AI.6620

Amount of Each Receipt this Period

1.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Danilo Ramirez

Mailing Address 28W525 Diversey Parkway

City

Chicago

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3.00

Date of Receipt

10 / 04 / 2013

Transaction ID : SA11AI.6621

Amount of Each Receipt this Period

2.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

C. Hagen Sahn

Mailing Address 8828 Kelsey Dr.

City

Elk Grove

State

CA

Zip Code

95624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Elect Engr

SMUD

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2013

Transaction ID : SA11AI.6684

Amount of Each Receipt this Period

50.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. TRUDY SALVEN

Mailing Address 26820 marina point lane unit 5

City State Zip Code
valencia CA 91355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 09 / 2013

Transaction ID : SA11AI.6657

Amount of Each Receipt this Period

100.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. julian shand

Mailing Address 1141 eastminster dr

City State Zip Code
columbia SC 29204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 02 / 2013

Transaction ID : SA11AI.6614

Amount of Each Receipt this Period

10.00

Kirk Jorgensen for Congress

Full Name (Last, First, Middle Initial)

C. lynette simonson

Mailing Address 373 Shining Rock

City State Zip Code
Beaumont CA 92223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

n/a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA11AI.6631

Amount of Each Receipt this Period

25.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Theresa Symonds

Mailing Address 49 Woodstone Road

City

Basking Ridge

State

NJ

Zip Code

07920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 10 / 2013

Transaction ID : SA11AI.6662

Amount of Each Receipt this Period

50.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Fred Taylor

Mailing Address 1701 9th Street

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Radio Marketing Specialist

GTG Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 08 / 2013

Transaction ID : SA11AI.6644

Amount of Each Receipt this Period

20.00

Cotton For Congress

Full Name (Last, First, Middle Initial)

C. george toth

Mailing Address 13 chesney In

City

glenside

State

PA

Zip Code

19038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

self

Chestnut Invst Adv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

10 / 25 / 2013

Transaction ID : SA11AI.6681

Amount of Each Receipt this Period

5.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Paul Tubel

Mailing Address 24 Autumn Crescent

City State Zip Code
The Woodlands TX 77381

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2013

Transaction ID : SA11AI.6642

Amount of Each Receipt this Period

100.00

Larsen for Congress

Full Name (Last, First, Middle Initial)

B. Martha Veerman

Mailing Address 2441 Doubletree Rd.

City State Zip Code
Spring Valley CA 91978

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Mgr. Assistance

General Atomics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period

15.00

Ted Cruz for Senate

Full Name (Last, First, Middle Initial)

C. Richard F Zamboni

Mailing Address 15714 Colorado Avenue

City State Zip Code
Paramount CA 90723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2013

Transaction ID : SA11AI.6618

Amount of Each Receipt this Period

100.00

Cotton For Congress

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.00

1835.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City

SAN DIEGO

State

CA

Zip Code

92127

FEC ID number of contributing
federal political committee.

C

C00546267

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

697.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2013

Transaction ID : SA15.6499

Amount of Each Receipt this Period

67.80

Card processing fees

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City

SAN DIEGO

State

CA

Zip Code

92127

FEC ID number of contributing
federal political committee.

C

C00546267

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

698.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 11 / 2013

Transaction ID : SA15.6513

Amount of Each Receipt this Period

1.40

Card processing fee

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.20

69.20

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

Three 7-segment displays are shown, each with a different color (blue, green, and red). The first display shows '10', the second shows '01', and the third shows '2013'. The displays are arranged horizontally and separated by slashes.

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

001

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

4.22

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

A. PNC Bank

Mailing Address 249 Fifth Ave
One PNC Plaza

City	State	Zip Code
Pittsburgh	PA	15222

Purpose of Disbursement
Merchant discount fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6489

Amount of Each Disbursement this Period

Satisfaction Level	Percentage
Very satisfied	29.15
Somewhat satisfied	35.15
Somewhat dissatisfied	22.15
Very dissatisfied	13.55

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	For the purchase of land and buildings
2	For the purchase of machinery and equipment
3	For the purchase of inventory
4	For the purchase of supplies and materials
5	For the purchase of services
6	For the purchase of investments
7	For the purchase of securities
8	For the purchase of other assets
9	For the purchase of other liabilities
10	For the purchase of other equity
11	For the purchase of other income
12	For the purchase of other expenses
13	For the purchase of other assets
14	For the purchase of other liabilities
15	For the purchase of other equity
16	For the purchase of other income
17	For the purchase of other expenses
18	For the purchase of other assets
19	For the purchase of other liabilities
20	For the purchase of other equity
21	For the purchase of other income
22	For the purchase of other expenses
23	For the purchase of other assets
24	For the purchase of other liabilities
25	For the purchase of other equity
26	For the purchase of other income
27	For the purchase of other expenses
28	For the purchase of other assets
29	For the purchase of other liabilities
30	For the purchase of other equity
31	For the purchase of other income
32	For the purchase of other expenses
33	For the purchase of other assets
34	For the purchase of other liabilities
35	For the purchase of other equity
36	For the purchase of other income
37	For the purchase of other expenses
38	For the purchase of other assets
39	For the purchase of other liabilities
40	For the purchase of other equity
41	For the purchase of other income
42	For the purchase of other expenses
43	For the purchase of other assets
44	For the purchase of other liabilities
45	For the purchase of other equity
46	For the purchase of other income
47	For the purchase of other expenses
48	For the purchase of other assets
49	For the purchase of other liabilities
50	For the purchase of other equity
51	For the purchase of other income
52	For the purchase of other expenses
53	For the purchase of other assets
54	For the purchase of other liabilities
55	For the purchase of other equity
56	For the purchase of other income
57	For the purchase of other expenses
58	For the purchase of other assets
59	For the purchase of other liabilities
60	For the purchase of other equity
61	For the purchase of other income
62	For the purchase of other expenses
63	For the purchase of other assets
64	For the purchase of other liabilities
65	For the purchase of other equity
66	For the purchase of other income
67	For the purchase of other expenses
68	For the purchase of other assets
69	For the purchase of other liabilities
70	For the purchase of other equity
71	For the purchase of other income
72	For the purchase of other expenses
73	For the purchase of other assets
74	For the purchase of other liabilities
75	For the purchase of other equity
76	For the purchase of other income
77	For the purchase of other expenses
78	For the purchase of other assets
79	For the purchase of other liabilities
80	For the purchase of other equity
81	For the purchase of other income
82	For the purchase of other expenses
83	For the purchase of other assets
84	For the purchase of other liabilities
85	For the purchase of other equity
86	For the purchase of other income
87	For the purchase of other expenses
88	For the purchase of other assets
89	For the purchase of other liabilities
90	For the purchase of other equity
91	For the purchase of other income
92	For the purchase of other expenses
93	For the purchase of other assets
94	For the purchase of other liabilities
95	For the purchase of other equity
96	For the purchase of other income
97	For the purchase of other expenses
98	For the purchase of other assets
99	For the purchase of other liabilities
100	For the purchase of other equity

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

29.15

TOTAL This Period (last page this line number only).....

247.48

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
kimball, lange

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6587

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Zamboni, Richard F

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6588

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Collier, Paul

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6589

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. COTTON FOR CONGRESS

Date of Disbursement

Three digital displays showing the date 10/11/2013 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '11' with 'D' indicators above it. The third display shows '2013' with 'Y' indicators above it.

Transaction ID : SB23.6590

Amount of Each Disbursement this Period

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

Date of Disbursement

City	State	Zip Code
DARDANELLE	AR	72834

Transaction ID : SB23.6591

Purpose of Disbursement	Martin, Dorothy
-------------------------	-----------------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

Date of Disbursement

City	State	Zip Code
DARDANELLE	AR	72834

Transaction ID : SB23.6592

Purpose of Disbursement
Lyons, Douglas

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
Other (specify) ▼

State: AR District: 04

SUBTOTAL of Disbursements This Page (optional).....

65.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
simonson, lynette

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6593

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Navarro, Lupe

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6594

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Hall, Catherine

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 04

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6595

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

80.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Lopez, Gregory

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6596

Amount of Each Disbursement this Period

525.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Taylor, Fred

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6597

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Lyday, David

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6598

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

555.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Crear, David

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6599

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Lang, Karen

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6600

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Dawson, Kenneth

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6601

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

120.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Bullman, George

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SB23.6602

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Atkinson, George

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SB23.6603

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR CONGRESS

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
becker, robert

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SB23.6604

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

10.00

25.00

25.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Ritter, Eugene

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6538

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Stratton, Neil

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6539

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Stanek, John

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6540

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

35.00

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	50

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Jasion, Mary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6547

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Landon, Karen

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6548

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Foutz, Helena

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6549

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Noble, Anna

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6553

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Madere, Glenn

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6554

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Hoffman, William E.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6555

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

320.00

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

Age Group	Percentage
18-24	23.5
25-34	21.5
35-44	19.5
45-54	17.5
55-64	15.5
65-74	13.5
75-84	11.5
85+	1.5

Age Group	Percentage
18-24	100%
25-34	100%
35-44	100%
45-54	100%
55-64	100%
65-74	100%
75-84	100%
85+	50.00%

25.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Powell, Brian

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6559

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Santillan, Juan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6560

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Stevenson, Kevin

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6561

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

65.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Dick, Cheryl

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6562

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Cignetti, Stephen

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6563

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Yount, Alison

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6564

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

175.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

10.00



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Eastman, John

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6568

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Nixon, J T

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6569

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Kirk Jorgensen for Congress

Mailing Address 14677 Via Bettona

City	State	Zip Code
SAN DIEGO	CA	92127

Purpose of Disbursement
Magro, Ken

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2013

Transaction ID : SB23.6570

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

360.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

25.00

Age Group	Number of people
13-17	10
18-24	15
25-34	20
35-44	25
45-54	20
55-64	15
65-74	10
75-84	5
85+	2.5

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Ramirez, Danilo

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6521

Amount of Each Disbursement this Period

										1.00
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Full Name (Last, First, Middle Initial)

B. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Ramirez, Danilo

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6522

Amount of Each Disbursement this Period

										2.00
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Full Name (Last, First, Middle Initial)

C. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Cripe, Stephanie

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6523

Amount of Each Disbursement this Period

										10.00
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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

										13.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Tubel, Paul

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6524

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Notzon, Frances

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6525

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
DeMaso, Jeffrey

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6526

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

120.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
melton, gary

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6527

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Ferri, Michael

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6528

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Hancock, Michael W

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6529

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
SALVEN, TRUDY

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6530

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Cardona, Marie

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6531

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Symonds, Theresa

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 07

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6532

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Denis, Sandy

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NJ	District: 07

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6533

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Larsen for Congress

Mailing Address PO Box 214

City	State	Zip Code
OLDWICK	NJ	08858

Purpose of Disbursement
Clawser, Samuel

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NJ	District: 07

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2013

Transaction ID : SB23.6534

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

C. ROUNDS FOR SENATEMailing Address PO BOX 250
223 E CAPITOL AVENUE

City	State	Zip Code
PIERRE	SD	57501

Purpose of Disbursement
Chavez, Leroy

Candidate Name

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: SD	District: 00

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6577

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

32.00

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. TED CRUZ FOR SENATE

Mailing Address 815 A BRAZOS
PMB 550

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement	Williams, Jackie
-------------------------	------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input checked="" type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State: TX	District: 00	

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three 7-segment displays are shown, each with a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third. The first display shows '10', the second shows '04', and the third shows '2013'. The displays are connected to a common ground.

Transaction ID : SB23.6578

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	23.5
25-34	21.5
35-44	19.5
45-54	17.5
55-64	15.5
65-74	13.5
75-84	11.5
85+	1.5

Full Name (Last, First, Middle Initial)

B. TED CRUZ FOR SENATE

Mailing Address 815 A BRAZOS
PMB 550

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
Veerman, Martha

Candidate Name

Office Sought: ☐ House
☒ Senate
☐ President
 State: TX District: 00

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB23.6579

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	14.5
25-34	13.5
35-44	12.5
45-54	11.5
55-64	10.5
65-74	9.5
75-84	8.5
85+	1.5

Full Name (Last, First, Middle Initial)

C. TED CRUZ FOR SENATE

Mailing Address 815 A BRAZOS
PMB 550

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement	Presas, Erica
-------------------------	---------------

Candidate Name

Office Sought: ☐ House
☒ Senate
☐ President
 State: TX District: 00

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB23.6580

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

50.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. TREADWELL ALASKA INC

Mailing Address PO Box 200125

City	State	Zip Code
Alaska	AK	99520

Purpose of Disbursement
kimball, lange

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AK	District: 00

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6575

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. TREADWELL ALASKA INC

Mailing Address PO Box 200125

City	State	Zip Code
Alaska	AK	99520

Purpose of Disbursement
Chavez, Leroy

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AK	District: 00

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : SB23.6576

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

3580.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 68

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Gregory Lopez

Mailing Address 364 E. Dexter St.

City	State	Zip Code
Covina	CA	91723

Purpose of Disbursement
Refund - accidental amount

Candidate Name

COTTON FOR CONGRESSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SB28A.6692

Amount of Each Disbursement this Period

525.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

525.00

525.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

August use of mailing address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4148

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

September use of address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

October use of mailing address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4178

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

750.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 57 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

November use of mailing address, phone,
officeMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4179

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

December use of mailing address, phone,
officeMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD10.4180

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

Mass emails supporting Jorgensen for
CongressMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

4357.75

Transaction ID : SD10.5069

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4357.75

1) **SUBTOTALS** This Period This Page (optional)..... ►

4707.75

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 58 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

Fundraising emails in July

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

3606.78

Transaction ID : SD10.5212

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3606.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

February and March reporting and processing services retainer

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4181

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

April retainer for reporting and processing services

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4190

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6606.78

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

May reporting and processing services
retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4191

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

May reporting and processing services and
June retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2748.93

Transaction ID : SD10.4192

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2748.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

June reporting and processing services and
July retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2767.00

Transaction ID : SD10.4193

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2767.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6515.93

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

October reporting and processing services and
November retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

307.50

Transaction ID : SD10.4186

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

307.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

November reporting and processing services
and December retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2657.00

Transaction ID : SD10.4185

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2657.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

December reporting and processing services
and Jan retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2465.00

Transaction ID : SD10.4184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2465.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5429.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

January reporting and processing services and
Feb retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2255.00

Transaction ID : SD10.4233

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2255.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Feb reporting and processing/Mar legal and
reporting retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4319

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Mar reporting and processing/Apr legal and
reporting retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4374

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6255.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 62 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal compliance, bookkeeping, and reporting
services in April

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

3737.50

Transaction ID : SD10.4702

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3737.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal compliance, bookkeeping, and reporting
services in May

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2907.50

Transaction ID : SD10.5067

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2907.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

June administrative and legal services.

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2477.05

Transaction ID : SD10.5569

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2477.05

1) **SUBTOTALS** This Period This Page (optional)..... ►

9122.05

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 68

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Bundling, administrative, legal, and office
services

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2077.60

Transaction ID : SD10.5600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2077.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Sept. bundling, administrative, legal, and office
services

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2067.50

Transaction ID : SD10.5971

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2067.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Sept. reporting and processing services and
Oct. retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6485

Amount Incurred This Period

2097.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

2097.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

6242.60

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 64 OF 68

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Fund

Nature of Debt (Purpose):

Fundraising emails in July 2013

Mailing Address 2029 K St NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

7864.32

Transaction ID : SD10.5208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7864.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

April legal services retainer

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

May legal services retainer

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4199

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

9864.32

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 65 OF 68

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

June legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

July legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

August legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 66 OF 68

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

September legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4203

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

October legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

November legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 67 OF 68

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

December legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

March legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4196

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Barry A Bostrom

Nature of Debt (Purpose):

Legal services in January

Mailing Address 2524 N 8th Street

City

State

Zip Code

Terre Haute

IN

47804

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4194

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 68 OF 68

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Paul Bothwell

Nature of Debt (Purpose):

Administrative services July 2011 - March 2012

Mailing Address 606 S. Taylor St.

City State

Zip Code

Arlington

VA

22204

Outstanding Balance Beginning This Period

5400.00

Transaction ID : SD10.4230

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

5400.00

2) **TOTALS** This Period (last page this line number only)..... ►

69893.93

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

69893.93